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Summary of midterm reviews of country programmes

Latin America and Caribbean region

Summary

This regional summary of midterm reviews of country programmes conducted in 2008 was prepared in response to Executive Board decision 1995/8. The Executive Board is invited to comment on the report and provide guidance to the secretariat.

Introduction

1. The Latin America and Caribbean region continues to exhibit deep social and economic disparities, with large numbers of people suffering exclusion. The continued use of national averages by governments and international organizations to characterize progress towards the Millennium Development Goals gives the impression that the region is “on track” to meet the goals: poverty rates have decreased, children’s access to education has improved, gender gaps are tending to close and child mortality rates are falling. However, this apparent progress ignores the basic principles of equity and universality, as national averages mask large disparities at subnational level and between urban and rural areas, men and women, and indigenous and Afro-descendent populations. A focus on public policies to redress disparities and exclusion is a key strategy and feature of UNICEF country programs in Latin America and the Caribbean.

2. This report summarizes two mid-term reviews (MTRs), conducted in Guyana and Peru in 2008. These MTRs highlight the significant contributions by UNICEF and partners in addressing major challenges for children and women and in

* E/ICEF/2009/16.

achieving the Millennium Development Goals. Important lessons are derived from the work on capacity development, addressing the rights of indigenous and excluded populations, and influencing policies at national- and subnational level.

Midterm reviews

Guyana

3. **Introduction.** The programme of cooperation covered the implementation period from January 2006 to July 2008. The Ministry of Foreign Affairs directed the 2008 MTR in a participatory and consultative process in close collaboration with UNICEF and line ministries, local governments, other United Nations agencies and non-governmental organizations. In addition to the internal and external consultations, a UNICEF programme performance assessment was conducted as part of the MTR process. This assessment primarily reviewed the strategies applied for obtaining results in the programme of cooperation and provided a good basis for the MTR.

4. **Update of the situation of children and women.** Although beset by formidable challenges, Guyana has been able to maintain steady progress towards the Millennium Development Goals. Yet the pace of progress may be insufficient to achieve some goals by 2015, particularly in reducing poverty and child mortality. The substantial decline in debt servicing has afforded Guyana the opportunity to divert increasingly more of its resources towards poverty reduction. However, the challenge remains to translate positive economic performance into effective public policies and national strategic plans benefiting the well-being of all children and their families.

5. Geographic disparities in access to primary education between the coastal and interior regions have almost disappeared. With a net primary school enrolment rate of 96 per cent, Guyana is on track to achieve universal primary education, yet only 69 per cent of children make the transition to secondary school. Guyana has achieved gender parity at the primary level but not at the secondary level, with a gender parity index of 1.1 reflecting the general Caribbean trend towards under-representation of boys in secondary education. More than 16 per cent of children aged 5-14 years are engaged in child labour, but this represents a large improvement over the 2000 figure of 27 per cent.

6. Though great progress has been made in reducing child mortality, additional and accelerated efforts will be needed. This is particularly true for the difficult-to-reach regions of the interior, where child mortality rates are still much higher than in the coastal zone. Progress in immunization is encouraging, as confirmed by Guyana having received the 2006 "Henry Smith" award from the Pan American Health Organization for the most improving country.

7. Important progress has been made over the past few years to combat HIV/AIDS, though infection rates remain high (2.4 per cent), as in other countries in the Caribbean subregion. Nevertheless, comprehensive knowledge on HIV prevention has risen significantly, and the number of pregnant women tested for HIV has doubled in recent years.

8. Violence against children and women remains a key issue. Recent data indicate that a large majority (74 per cent) of children are subjected to at least one form of

psychological or physical punishment by their mothers/caretakers or other adult household members, with 8 per cent receiving severe physical punishment.

9. While the risk of flooding was better managed due to improved maintenance of drainage systems, Guyana remains a highly vulnerable country, with a shoreline partly below sea level. Hence, it will be severely affected by rising sea levels due to climate change, an issue figuring at the top of the Government's international agenda.

10. **Progress and key results.** The programme of cooperation in Guyana has three parts: (1) Public Policy, Promotion of Child Rights Protection, (2) Child Survival and Development, and (3) Adolescent Development and Participation. The MTR confirmed that the programme components and the applied strategies are still very relevant to the country's context, within the framework of the United Nations Development Assistance Framework and national development plans. UNICEF, through a wide range of strategic partnerships, is on track to achieving results as formulated.

11. In terms of child protection, support has been wide ranging and largely successful, while strong potential for further advances exists. Based on the concluding observations of the Committee on the Rights of the Child and the Committee on the Elimination of Discrimination against Women, technical assistance was provided to conduct several revisions to national legislation. As a result, the principle of the best interest of the child is now clearly expressed in the Protection of Children Bill. Also, the "minimum standards for children in residential care", particularly aimed at ensuring the rights and well-being of a large group of orphaned and otherwise vulnerable children, were drafted and are now fully implemented. Finally, almost 90 per cent of social workers are trained to identify, prevent and respond to abuse of children and women.

12. Though public policy initiatives have been difficult to advance in a challenging national context, several major results were recorded in the MTR. A wide range of indicators — disaggregated by gender, wealth quintile, geographical area and ethnicity — were collected as part of the multiple indicator cluster survey, and it is considered a major contribution to monitoring progress towards the Millennium Development Goals in the country. The results also support evidence-informed decision-making and advocacy, particularly ensuring further attention to the rights of the most excluded and disadvantaged, mostly in the interior of the country. The introduction of DevInfo, in partnership with CARICOM (the Caribbean Community), is also supporting the dissemination and use of disaggregated statistics such as those collected in the multiple indicator cluster survey.

13. In early childhood development (ECD) good results were achieved, particularly through various partnerships. Inter-agency collaboration was used effectively in the process for establishing standardized training for child care practitioners, review of minimum standards for ECD services and sustaining the National Steering Committee for ECD in working to meet the goals set by the CARICOM Council for Social and Human Development. Though good progress was recorded in providing early childhood education, the MTR also concluded that more efforts are required towards reducing malnutrition among young children and improving nutrition practices. These include exclusive breastfeeding for infants and use of iodized salt.

14. Strides have also been made towards achieving higher completion rates in basic education, with improvement in quality and gender-sensitive, inclusive and child-friendly environments. As a result of the roll-out and promotion efforts, the child-friendly schools initiative was initiated in some 85 per cent of schools in six regions. The success of the programme contributes significantly to the goals of the Education for All Fast Track Initiative and the National Education Strategic Plan, and it has proved itself to various partners. For example, the World Bank committed to partnering with UNICEF in rolling out the initiative in one of the country's regions, with a goal of 80 per cent of schools adopting the established quality standards.

15. Extensive efforts have been made towards ensuring that by the end of the current country programme in 2010 all pregnant women, breastfeeding mothers and children will have access to services for prevention of mother-to-child transmission (PMTCT) of HIV as well as care and treatment. The five-year national strategic plan on PMTCT has been completed, with UNICEF as the lead agency. UNICEF support has been fundamental to integrating PMTCT services into the maternal and child health programme. Moreover, support from UNICEF and its partners has resulted in establishment of a national multisectoral PMTCT Committee. As a result of these actions, PMTCT services have been expanded from 10 pilot sites in 2001 to 107 antenatal clinics (66 per cent of the total), resulting in 80 per cent of pregnant women being counselled and tested for HIV in 2007. These services are expected to reach all pregnant women by 2010.

16. A comprehensive adolescent development and participation strategy, addressing violence reduction, protection and HIV prevention, was prepared and implemented together with partners. Innovative approaches have so far particularly resulted in improved access to youth-friendly health services and targeted information related to HIV prevention. One successful strategy has been sports for programming purposes. The Cricket World Cup in 2007, which took place partly in Guyana, served as a vehicle for HIV programming for adolescents. Thousands of adolescents were sensitized in HIV prevention before, during and after the tournament. This success led to the decision to continue using sports as a medium for reaching young people, not just for HIV prevention but also for adolescent development and empowerment.

17. Life-skills education for adolescents was also introduced in schools, with 53 per cent of all teachers having the knowledge and skills to provide such education. Non-formal education activities, such as those of the Guyana Girl Scouts Association, were used to further promote negotiation and peaceful conflict resolution skills in all regions of the country.

18. **Resources used.** The country programme of cooperation for 2006-2010 started with an approved planning ceiling of \$5,345,000, of which \$3,345,000 was regular resources and \$2,000,000 other resources. Resources were received from thematic and set-aside funds as well as a variety of bilateral donors and National Committees. The programme also benefited from partnerships with the corporate sector. Implementation rates remained high over the first years of the programme. In 2008, the Executive Board approved an increase in other resources to \$8,500,000.

19. **Constraints and opportunities affecting progress.** The programme has been successful in fund-raising, significantly exceeding the projected budget for other resources in every year. This has provided good opportunities for scaling up existing

initiatives, especially in the interior. However, funding has not been uniform, and the important adolescent and participation component in particular experienced funding shortfalls.

20. While good overall progress was made towards achieving defined results, high rates of staff rotation and retirement among implementing partners, including at the decision-making level, hampered effective and efficient programming. Given this situation, capacity-building will need continued emphasis at the national level, but also increasingly at the subnational level. Facilitation of cross-sectoral cooperation among partners will also need more attention.

21. **Adjustments made.** The overall goals and outcomes of the country programme have not been changed but rather modified to reflect the scope of outreach. This includes expansion of the programmes to all 10 regions, and particularly to the interior, where significant development challenges persist. Also, more attention will be provided to addressing the rights of orphaned and other vulnerable children and to disaster preparedness, response and risk reduction. Moreover, the MTR process revealed continued limited availability of key data. Efforts will be intensified to obtain more high-quality data on children, adolescents and women for evidence-informed decision-making.

Peru

22. **Introduction.** Between March and December 2008, a highly participative MTR process was planned and implemented with the National Coordination Committee for the Programme of Cooperation, headed by the Peruvian Agency for International Cooperation. The MTR included extensive consultations with partners at national, regional, provincial and district levels. Four thematic participatory workshops were organized with line ministries and other partners in Lima, and seven workshops were organized in five regions with local partners — delegates from regional and municipal governments, civil society, academics and indigenous organizations. The process involved around 400 representatives from government, NGOs, universities, United Nations agencies and other actors, and about 70 adolescents. In all meetings, the updated State of the Peruvian Children¹ report served as the basis for discussions. UNICEF also conducted a study on its image in Peru. Two external evaluations were conducted: one of the Regional Andean Project of Bilingual Intercultural Education for the Amazon Region programme, aimed at improving education for indigenous children in the Amazon region, and one of the Promotion of Sustainable Human Development programme in the Rio Santiago Basin.

23. **Update of the situation of children and women.** Peru has continued to experience steady economic growth (9.8 per cent growth rate in gross domestic product in 2008), high foreign reserves (\$34 billion) and declining external debt. Nevertheless, strong disparities persist according to area of residence, socio-economic level and ethnic origin. According to the National Institute of Statistics, in 2007 poverty fell to 39.3 per cent from the 2005 rate of 48.7 per cent, and extreme poverty decreased from 17.4 per cent to 13.7 per cent. However, the decline has been greater in urban areas than rural areas. In some regions, especially the Andes, the poverty rate continues to be as high as 86 per cent (in Huancavelica).

¹ Available for download at www.unicef.org/peru/spanish/resources_12560.htm.

24. The Government pursues disparity reduction through implementation of a number of social policies and programmes. For example, the implementation of the national “Crecer” (increase) strategy aims to reduce poverty and chronic child malnutrition by improving coordination between social programmes and different ministries. Also, the conditional cash transfer programme “Juntos” (together) has increased its coverage to reach 410,961 households in 638 districts in 14 regions. The expansion of these social programmes has increased social spending by 67 per cent. In line with the ongoing decentralization, capacity building is urgently needed, especially for regional and local governments to improve budget management, in terms of programming and execution.

25. Peru has made significant progress in reducing the child mortality rate, which dropped from 41 per 1,000 live births in 2000 to 24 in 2008. Major gains were also observed in other health indicators. This is attributed mostly to expansion of health services in rural areas, reducing the long-standing gap between urban and rural health indicators. On the other hand, neonatal mortality, which represents 63 per cent of infant mortality, did not decrease to the same extent.

26. Though chronic malnutrition in children under 5 years decreased nationwide to 23 per cent in 2007 and to 37 per cent in rural areas, it remains a major threat to child development. Another nutritional issue is the high prevalence of iron deficiency anaemia. Three-quarters of children have access to safe drinking water nationwide, but this rate drops to 32 per cent in rural areas. The gap in access to improved sanitation is even greater; 72 per cent of urban children have access to sanitation while only 9 per cent do in rural areas.

27. Access to preschool for children between ages 3 and 5 is low, with a national rate of 67 per cent. The primary school enrolment rate reaches 93 per cent. However, 23 per cent of the children are in a grade that does not correspond to their age. Nationwide, 73 per cent of adolescents aged 12 to 16 are enrolled in secondary education. The figure drops significantly for those living in extreme poverty (49 per cent) and those whose mother tongue is an Amazonian language (43 per cent). Quality of education also remains a major concern, especially in the regions where many people have an indigenous language as their mother tongue. Half of all adolescents aged 14 to 17 (32 per cent urban, 80 per cent rural) are working.

28. Birth registration rates range from 98 per cent in some coastal areas to less than 50 per cent in remote provinces with high percentages of indigenous people. With regard to domestic violence, 37 per cent of mothers with children under 5 report having suffered some type of physical violence or abuse by their current or last partner. Early pregnancy affects 13 per cent of girls aged 15 to 20 at a national level. This rate is above 25 per cent in Amazon regions such as Loreto and Ucayali, and it reaches almost 40 per cent among girls who speak an Amazonian indigenous language. HIV/AIDS cases in the 20-to-29 age group are increasing and demonstrating a further feminization of the epidemic.

29. **Progress and key results.** The country programme has two programmes: (1) Policy and Advocacy for Child Rights, and (2) Development of Decentralized Capacities for Realizing Child Rights. The latter programme encompasses five components: mobilization for child rights and social surveillance of public policies; child survival and development; improvement in basic education quality and prioritizing of girls; protection of child rights; and HIV/AIDS and children. The

MTR confirmed that the programmes and components are on track towards achieving the formulated results. They are also contributing to progressively achieving national development goals as well as the Millennium Development Goals. The MTR also confirmed the role of UNICEF in Peru, a middle-income country, as an advocate. UNICEF has successfully used its convening power to broker results for children, function as a knowledge leader on child rights and help give a “voice” to children and women.

30. Important issues such as chronic malnutrition and violence have been on the national agenda since the 2006 electoral process, and 11 priority actions for children were included in the national budget. The programme also contributed to the design and implementation of the national Crecer strategy aimed at reducing poverty and chronic malnutrition. It is based on the good practices developed through the UNICEF supported Buen Inicio (Good Start) programme. In addition, support was provided to design and implement the conditional cash transfer programme Juntos. The close links between Crecer and Juntos are starting to reduce chronic malnutrition. Though stunting rates are high, in children under 5 they fell to 22.6 per cent nationally in 2007 and to 36.9 per cent in rural areas. These rates are expected to decline further over the coming years.

31. Attention was also given to promotion of breastfeeding and to maternal and neonatal health. UNICEF and partners further supported efforts to sustain and increase immunization levels, particularly among the most excluded population groups. For example, the programme has been supporting the Shapra and Candoshi indigenous groups by promoting the immunization of newborns against hepatitis B. Support has been essential in raising immunization rates among newborns within the first 24 hours from 41 per cent in 2003 to a sustained coverage of 90 per cent more recently. Hepatitis B immunization is now a routine activity of the health system.

32. Other important results in the health sector include: (a) progressive adoption of Sprinkles, the multi-micronutrient supplement against anaemia, which has already reduced anaemia among children in selected areas; (b) an increase in HIV screening of pregnant women from 31 per cent to 70 per cent, reducing the risk of mother-to-child transmission; (c) implementation and expansion of services for prevention of violence and services to victims of violence such as Gessel chambers (interview rooms for victims), MAMIs (health care modules for child abuse victims) and an indigenous registrars initiative; and (d) improved and strengthened intercultural and bilingual education both national and regionally.

33. Due to the emphasis on programming at the subnational level, attention to child rights has increased in regional and municipal planning and social budgets, and more resources have been shifted to the most excluded. For example, the social budgets in Cusco and Ayacucho regions increased to 40 to 45 per cent of the total regional budget. Over \$5 million was invested in 20 municipal and regional social projects designed specifically for fulfilment of child rights. Child-related issues were also incorporated in 21 regional and municipal development plans, and a Child Friendly Municipalities association was initiated. Such advances were possible due to the physical presence of UNICEF through staff in sub-offices in strategic locations. This enabled continuous advocacy and collaboration with all stakeholders.

34. The UNICEF presence at subnational level and the various geographical “platforms” (Amazon region, Andean region and the Altiplano border area with Bolivia) have also proved effective in addressing cultural diversity. Though some of

these strategies still need further development and implementation, good results were obtained with health and education programmes aimed at specific ethnic groups. Moreover, a specific “platform” was developed for working in marginalized urban areas.

35. By using its convening power and bringing together key stakeholders, including United Nations agencies, UNICEF is brokering tangible results for children. The strong programme focus on using data, studies and evaluations for evidence-informed decision-making has also proved effective. For example, preparation of the State of Peruvian Children created a good opportunity for highlighting the situation of children and women in various regions and provinces.

36. The response to the earthquake of August 2007 achieved very good results. Significant UNICEF technical assistance and financial support led to construction of temporary classrooms and early learning centres. As a result, over 34,000 primary and secondary school students were able to continue attending school, and 6,500 children were able to remain in early childhood education. The joint United Nations office established in the affected area immediately after the earthquake contributed largely to the effective coordination and joint programming between United Nations agencies in the emergency relief and recovery phases. The response to the earthquake, including technical and financial assistance to local governments and advocacy for adequate resources from the central government, also highlighted the role of UNICEF in supporting emergency response in middle-income countries.

37. **Resources used.** The country programme for 2006-2010 started with an approved planning ceiling of \$23,200,000, of which \$4,500,000 was from regular resources. As a result of successful fund-raising, the available funds for 2006-2008 amounted to \$21,776,000. This included funding for emergency response and multi-country programmes. Virtually all of these funds (98 per cent) were used in the 2006-2008 period. Significant additional regular resources were obtained through discretionary funding and thematic funds. Other resources were largely obtained from a variety of donors; this includes bilateral donors and National Committees as well as individual donors and the corporate sector in the country.

38. **Constraints and opportunities affecting progress.** The major earthquake of August 2007 required attention of all the programme components. Nevertheless, regular programme implementation was not affected. The response to the emergency, with the additional financial resources, also provided opportunities for advocacy on disparity reduction and for piloting innovative approaches in the affected area. These approaches could be replicated in other parts of the country once positively evaluated.

39. Decentralization poses some constraints to programme implementation. Moreover, subnational authorities do not always have the resources and clarity on their roles and responsibilities in relation to decentralization of functions. Though UNICEF and its partners support building subnational capacities consistent with decentralization, frequent rotation of staff among implementing partners affects the programme. Also concerning decentralization, the MTR highlighted the need for greater efforts in programming in the Amazon region and the Altiplano bordering Bolivia.

40. **Adjustments made.** The MTR confirmed the relevance of the programme structure; the appropriateness of its strategies and actions for responding to the

problems affecting children and adolescents in Peru; its alignment with national policies and plans; and its coherence with UNICEF and United Nations global mandates. Designed with a rights-based approach, the programme is consistent with the UNICEF medium-term strategic plan (2006-2011), contributes to achievement of the Millennium Declaration and Millennium Development Goals, and is solidly in line with the United Nations Development Assistance Framework. However, the MTR has recommended some strategic adjustments to respond to the expectations of partners and to continue adapting to the new context of the country, especially the decentralization process. These will be incorporated into the last biennium of the programme (2009-2010) and into the design of the next programme, for 2011-2015.

41. UNICEF Peru will continue to emphasize the decentralization process; advocacy for putting child rights and investments in children at the heart of social development for regional and municipal governments; promotion and facilitation of multisectoral approaches; coordination between ministries and sectors and between central and regional governments; and creation of partnerships with the public sector, civil society and private sector. Subnational capacity building will be strengthened to improve the design and management of public policies, budgets and information systems for children. The UNICEF programme presence will be further emphasized in the Andean and Amazon regions and in marginalized urban zones. In this context, cooperation with other United Nations agencies will be intensified.

42. UNICEF will increase its role in generating and managing knowledge on children while also creating more opportunities for them to express their opinions and participate in decision-making processes. While interculturalism is already well mainstreamed in the programme, the gender focus must be strengthened and communication for development expanded. Moreover, based on lessons learned from the earthquake response in 2007, UNICEF and its partners will assume a greater role in supporting government in emergency preparedness and disaster risk-reduction efforts.

Conclusion

43. The two MTRs discussed in this report demonstrate the importance of UNICEF cooperation in countries in Latin America and the Caribbean, ensuring that children's and women's rights are clearly reflected in policies and actions nationally and locally. In this regard, advocacy has been effective in addressing the rights of children and women and the use of data and knowledge for evidence-informed decision-making, as well as influencing the formulation of social policies. For example, preparation of the strong analysis of the situation of children in Peru and support to implementation of the multiple indicator cluster survey in Guyana proved to be important tools for engaging in policy discussions with development partners at all levels.

44. The combination of influencing policies at the national level while simultaneously ensuring tangible results for children at subnational level, often in regions and municipalities, is gradually being reflected in the majority of the country programmes throughout the region. Therefore, continued support to decentralization processes and to building subnational capacities remains crucial for UNICEF. Using its convening power and bringing the various stakeholders into the development process, UNICEF also contributes significantly to intersectoral

coordination and cooperation at all decision-making levels and among development partners, including United Nations agencies. In certain countries, such as Peru, support to decentralization requires more subnational presence to increase the impact.

45. The two MTR processes also highlight the importance of targeted strategies for specific population groups and geographic areas. In Peru, this has resulted in the creation of different geographical “platforms”, aimed at adequately addressing the rights of indigenous groups and other excluded populations. In Guyana, strategies targeting adolescent development are strongly emphasized. Such strategies are being applied throughout the Caribbean subregion to better address the rights of this age group, but they need further expansion.

46. In conclusion, the programmes and strategies implemented in Peru and Guyana support progressive achievement of the Millennium Development Goals to help all children and women, regardless of their geographic location or ethnicity.
